## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N05000006072

Entity Name: ABC ADOPTIONS, INC.

FILED Oct 10, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6668 RIVER ROAD 5313 LOCUST PLACE

NEW PORT RICHEY, FL 34652 NEW PORT RICHEY, FL 34652

Current Mailing Address: New Mailing Address:

6668 RIVER ROAD

NEW PORT RICHEY, FL 34652

FEI Number: 20-2953819 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WEST, DEBRA 6668 RIVER ROAD

NEW PORT RICHEY, FL 34652 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DEBRA WEST

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

Name: WEST, JAMES L
Address: 6668 RIVER ROAD

Name: WEST, JAMES L
Address: 5313 LOCUST PLACE

City-St-Zip: NEW PORT RICHEY, FL 34652 City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: NOPPENBERGER, EDIE Name: NOPPENBERGER, EDIE

Address: 314 MIRA VISTA DRIVE Address: 5313 LOCUAT PLACE
City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 CROWDER, GAIL
 Name:
 CROWDER, GAIL

 Address:
 266 NW HARRIS LAKE DRIVE
 Address:
 5313 LOCUST PLACE

City-St-Zip: LAKE CITY, FL 32055 City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES L WEST P 10/10/2007